

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>3/19/05</u>		2 Serial/Patent # <u>10 512801</u>									
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
Filing			\$								
Amendment			\$								
Extension of Time			\$								
Notice of Appeal/Appeal			\$								
Petition			\$								
Issue			\$								
Cert of Correction/Terminal Disc.			\$								
Maintenance			\$								
Assignment			\$								
<input checked="" type="checkbox"/> Other			\$ <u>100.00</u>								
		7 TOTAL AMOUNT OF REFUND		\$ <u>100.00</u>							
8 TO BE REFUNDED BY:											
10 REASON:		Treasury Check									
<input checked="" type="checkbox"/> Overpayment		Credit Deposit A/C #:									
Duplicate Payment		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>0</td><td>7</td><td>--</td><td>)</td><td>3</td><td>9</td><td>2</td></tr></table>			0	7	--)	3	9	2
0	7	--)	3	9	2					
No Fee Due (Explanation):											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>A. Hwalek</u>		TITLE: <u>Asst. Dir.</u>									
SIGNATURE: <u>[Signature]</u>		PHONE: <u>308.9140 x201</u>									
OFFICE: _____											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: